Senate Finance Committee Chronic Care Workgroup June 22, 2015 Page #2

In my work as a Community Health Nurse with the York County Area Agency on Aging in Pennsylvania, I see firsthand effects of the cyclic hospital readmissions and downward spirals from ineffective chronic disease management. According to the York County Coroner's Office, the classification of death-related falls is on the increase; in 2011, there were 53 home/play accidents, most being falls. In 2014, the number increased to 84, with 67 of the 84 actually caused by falls. As of May 21, 2015, 31 deaths from falls occurred this year, evidence of an escalating rate. The evidence is clear to me, exhibited from reviewing levels of care determinations for nursing homes, teaching health and wellness evidence-based programs or championing a local Falls Free Coalition; health and wellness programs that are at the highest tier of evidence-base are proven to work.

As an advocate for the community we serve, I ask you, through the Chronic Care Workgroup, to build an official system of care that incorporates evidence-based programs for those at risk. This would include Medicare/Medicaid and insurance plans billing codes for proven education/behavior changing programs and patient incentives; improve the Medicare wellness visit to better promote healthy aging; address falls preventions screenings (use of CDC's STEADI tool); referrals to falls prevention programs; and address second falls as a Hospital Readmissions Reduction Measure.

It is a good feeling to know that every time I teach or coordinate a Matter of Balance class, there is a per capital savings of \$938 for each individual in total medical costs per year. More importantly, through this program, we are helping older adults manage and/or prevent their falls. Noteworthy is that the University of Pittsburgh partnered with the Pennsylvania Department of Aging, offering newer self-empowerment programs, the 10 Keys to Healthy Aging and Healthy Steps in Motion. Although I do not have firsthand experience with Stanford's Chronic Disease Self-Management Education Program, I am aware of the cost savings of \$364 in reduced emergency room visits and hospitalizations.

Thank you for your review of this letter and for considering the recommendations that will allow Medicare beneficiaries with chronic conditions, to live fuller, healthier, and more independent lives.

Sincerely,

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